

OPTIONAL BLOCK

(PLEASE PRINT OR TYPE ALL)

UNCLASSIFIED INFORMATION

1 P A P B S 2 2 0 0 - 0 0 0 0 0 0 0 0 0 0 0 0 4 1 1 1 1 4 5
8 9 LICENSEE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 31 CAT 58

1 L 6 0 5 0 - 0 2 7 7 7 0 1 0 8 7 9 2 0 1 2 2 7 2 9
8 REPORT SOURCE 60 61 DOCKET NUMBER 62 63 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

2 The cable spreading room cardox system was disabled in AM of 1/8/79 so
3 that cable work in the overhead could proceed. A firewatch was posted at
4 that time. When cable work was completed for the day at about 4:30 PM,
5 the working group supervision failed to notify the shift that they were
6 finished. During the 5½ hours in which the firewatch was not present,
7 the fire detection system was fully operable and numerous people were in
8 and out of the area. Safety significance is minimal.

9 SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE
A B 11 A 12 E 13 Z Z Z Z Z Z 14 Z 15 Z 16
17 LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO OCCURRENCE CODE REPORT TYPE REVISION NO
7 9 0 0 2 0 1 T 0
18 H 19 Z 20 Z 21 3 22 0 0 0 0 23 Y 24 N 25 Z 26 Z 27 9 9 28
33 ACTION TAKEN 34 FUTURE ACTION 35 EFFECT ON PLANT 36 SHUTDOWN METHOD 37 HOURS 38 ATTACHMENT SUBMITTED 39 NPRO 4 FORM SUB 40 PRIME COMP. SUPPLIER 41 COMPONENT MANUFACTURER

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

0 Construction supervision failed to notify shift upon completion of day's
1 work. The firewatch left the room upon work completion. The next operat-
2 ing shift, during normal surveillance of area, noticed the error and put
3 the cardox system in service. Construction personnel were instructed on
4 the importance of notifying shift supervision when work is completed.

5 FACILITY STATUS POWER OTHER STATUS (30) METHOD OF DISCOVERY DISCOVERY DESCRIPTION (37)
E 28 1 0 0 29 Unit 3 at 0% B 31 Routine Surveillance
6 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY (15) LOCATION OF RELEASE (36)
Z 33 Z 34 N/A N/A
7 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION (39)
0 0 0 37 Z 38 N/A
8 PERSONNEL INJURIES NUMBER DESCRIPTION (41)
0 0 0 40 N/A
9 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION (43)
Z 42 N/A
10 PUBLICITY NUMBER DESCRIPTION (45)
N 44 N/A

7902010114

NR USE ONLY

68 69 80

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